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COMMONWEALTH OF KENTUCKY  
TREY GRAYSON, SECRETARY OF STATE  
ANNUAL REPORT  
DUE JUNE 30, 2006



0425675

ORGANIZATION ID #  
0425675

STATE OR COUNTRY  
OF INCORPORATION

KY

ORGANIZATION  
DATE

12/19/1996

FILING  
FEE

\$15.00

(1) EXACT CORPORATE NAME AND CURRENT PRINCIPAL OFFICE ADDRESS

CANDLE RIDGE MINING, INC.  
517 BEECHWOOD DRIVE  
LONDON, KY 40744

RECEIVED  
JUN 26 2006

(3) THE PRINCIPAL OFFICE ADDRESS IS HEREBY CHANGED TO

COMMONWEALTH OF KENTUCKY

(2) CURRENT REGISTERED AGENT AND REGISTERED OFFICE ADDRESS

Changes made to the registered agent or registered office cannot be made on this form. Complete (4) to request a form to be mailed or download form from web site.

ROBERT M. NOONAN  
517 BEECHWOOD DRIVE  
LONDON, KY 40744

(4) MAIL A STATEMENT OF CHANGE OF AGENT OR OFFICE TO

(5) **PRINCIPAL OFFICERS** If (5) is blank, type or print the **names and business addresses** of the current principal officers. If sole officer, please note. The annual report will be returned if business addresses are not listed. If the corporation has previously filed an annual report, verify the names and titles of officers listed below. Please note any additions to or changes in the principal officers and **give the business address** for each person listed.

Sole Officer	Robert M. Noonan	Address
		Address
		Address
		Address
		Address

(6) **DIRECTORS** Type or print the **names and business addresses** of the corporation's directors. No listing of directors is verification that the corporation has dispensed with directors (KRS 271B.8-010(3)). **Nonprofit corporations must list three (3) or more directors** (KRS 273.211). The annual report will be returned if business addresses are not listed.

Name	Address
Name	Address
Name	Address
Name	Address

(7) Check here if you are a cooperative corporation or association organized under KRS 272. ☐

Check here if you are a rural electric or rural telephone cooperative corporation organized under KRS 279. ☐

I VERIFY THAT THE INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.

Signature of Officer or Chairman of the Board

ROBERT M. NOONAN  
Type or Print Name

PRESIDENT  
Title

06-09-06  
Date

**ANNUAL REPORT AND FILING FEE**

Submit for filing the completed annual report form and correct filing fee as indicated above. Make check payable to the "Kentucky State Treasurer". Please do not send cash.

**MAILING ADDRESS**

Trey Grayson  
Secretary of State  
P O Box 1150  
Frankfort, KY 40602-1150

**OFFICE LOCATION**

Secretary of State  
State Capitol, Room 154  
700 Capital Avenue  
Frankfort, KY 40601  
(502)-564-2848

**NOTE: P O Box 1150 is for  
annual report filings only.**